After all I am still a practicing physician and I maintain contact with other physicians as well as with patients who have been treated by other physicians or are being treated for non-psychiatric problems. I am impressed by the fact that the American Psychiatric Association is considering a closer look at its own advertising pages because drugs are being advertised and promoted for use in any and all human problems which are essentially normal stresses of every day living and in which no drug therapy is required or indicated. This is a recent decision which appeared not 12 years ago, but in the last issue of the Psychiatric News.

Since drug advertising that does not sell drugs does not survive it follows that the advertising that does survive is effective. A study of advertising that has survived is amply evidence that many drugs are being abused. In addition it has been estimated that 40% of all drugs are fixed combinations. With very few exceptions these are deplored by the majority of experts because they are considered irrational. To this estimate of about 40% we need only add 10% misuse of single drug entities. While my estimate is a guess it is also my guess that it errs on the low side of the true incidence of irrational prescribing. I still believe that the "chances that a patient will get the right drug in the right amount at the right time is in the order of 50%".

6. It has never been my intention to single out and to criticize Squibb. The practices I have described are drug industry practices and apply across the board. As I have pointed out on several occasions, I was aware of practices used by other companies that Squibb would not stoop to. While I was one of the executives who played poker with Dr. Henry Welch, I know of no evidence that Squibb supported his very profitable business in selling reprints or that Squibb tried to introduce a sales slogan into a supposedly objective symposium on antibiotics.

The conclusions I have drawn are based on an inside knowledge of the practices that were used, on a knowledge of why they existed and still exist, and on the information derived from a continuing study of advertising and promotion practices. So long as the profit motive is considered a legitimate part of medical and para-medical practices and drugs are advertised and promoted by "Madison Ave. tricks" that sell soap, cigarettes and toothpaste we will continue to have abuse.

Finally let me point out that my criticism of advertising and promotion practices included exhibits of advertisements printed in March 1969.

APPENDIX VII

U.S. SENATE,
SELECT COMMITTEE ON SMALL BUSINESS,
Washington, D.C., September 2, 1969.

Mr. EDWARD D. MARTIN,
National President,
Student American Medical Association,
Flossmoor, Ill.

DEAR MR. MARTIN: I am attaching a letter which I received from Senator Javits, in which he asked that certain questions be submitted to you for your consideration.

Senator Javits' questions and your answers will be inserted in the printed record of our hearings at an appropriate place.

Sincerely,

GAYLORD NELSON,
Chairman, Monopoly Subcommittee.

U.S. SENATE,
SELECT COMMITTEE ON SMALL BUSINESS,
Washington, D.C., June 24, 1969.

Hon. GAYLORD NELSON,
U.S. Senate,
Washington, D.C.

DEAR GAYLORD: At the conclusion of the hearings on the promotional activities of drug manufacturers which were held before your Monopoly Subcommittee on June 19, 1969, you granted the Minority Counsel's request to submit written questions to the witnesses, specifically to Messrs Henry Brodkin, Charles Payton, Edward Martin and Richard Pohl.